

# [Human health and the environment](https://assignbuster.com/human-health-and-the-environment/)

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Drinking water is a basic human need. It cannot be changed or done away with. Studies have shown that many places don’t have clean drinking water. This situation was taken as an opportunity to turn it into business idea by some and the concept of filtered and packaged drinking water came into existence. Organisations established for quality tests and research have given depressing results suggesting there is little reason for hope. “ Our tests strongly indicate that the purity of bottled water cannot be trusted," the study authors write according to laboratory tests conducted by the Environmental Working Group (EWG). " Given the industry's refusal to make available data to support their claims of superiority, consumer confidence in the purity of bottled water is simply not justified. 1" Such news also compels us to think that where does the packaged drinking water actually come from? It can come from the tap that you and I refused to trust and it in fact harms the environment as it promotes plastic production, thus putting money into big businesses’ pockets2. Production of plastic bottles consumes a lot of energy, effort and is a costly process. Many research groups have upheld that only a fraction of such bottles go into recycling. All countries, developed or developing have seen cases of diseases that are water borne. Thus, tap water cannot be completely harmful. However, in a place where there is no supply of proper drinking water, it is said, packaged water which has undergone reverse osmosis (RO) is definitely a better choice. However, not all packaged water is subjected to this process and bottled water in general comes with a high price tag, making it less affordable to the community. This stands to be an unjustifiable method as water is a fundamental necessity of human life. REFERENCES: 1. David Gutierrez. (2009, April 4). Bottled Water Found Contaminated with Medications, Fertilizer, Disinfection Chemicals. Retrieved from http://www. naturalnews. com/025993\_water\_bottled\_fertilizer. html#ixzz1xDJ65BPB 2. Cindy Jones-Shoeman. (2010, August 15). Reasons Why Everyone Should Avoid Bottled Water. Retrieved from http://www. naturalnews. com/029471\_bottled\_water\_plastics. html 2. Ans: Mercury’s uses have been appreciated from the historic times. The need for regulation has increased with the warnings of global warming and threatening environmental safety. If this issue is studied particularly with reference to Canada, in the year 2000 itself, according the Canadian Council of Ministers of the Environment, Canada wide standards for mercury emissions were particularly issued which noted that mercury levels in fish pose large unquantified risk to fish eating wild life1 and such impact needs to be considered for human beings who consume such fish as well. Mercury travels long distances and is deposited far from the source of emission. In fact according to Canadian sources, only 4% of mercury deposits in Canada are emitted in Canada and the remaining 96% is from foreign sources in the year 20062. Mercury is known as a neurotoxin, causing intense harm to children and pregnant women. Yet there has not been a federal law in place in the USA, until the Obama government announced a new tough rule in December 2011, as reported by the Los Angeles Times. USA being the closest and most industrial country to Canada, it is imperative for the Canadian policy makers to look into the following toxic features held by mercury and then persuade towards implementing the proposed policy. Scientific studies have provided a list of diseases caused due to mercury and its play in the environment at different levels. 1. Mercury and most of its compounds are highly toxic 2. It is dense, heavy silver like metal with poisonous features 3. Mercury, in its pure form can be easily inhaled or absorbed through ingestion and skin 4. Due to its toxic abilities, it is used in preparation of fungicides 5. Once released, it persists in the environment in air and water. However, zero mercury can be a distant possibility when worked with a phased out plan as mercury has crept in too deep into the industrial segment of the society. REFERENCES: 1. Canadian Council of Ministers. (2000, June 5-6) http://www. ccme. ca/assets/pdf/mercury\_emis\_std\_e1. pdf 2. Environment Canada, Risk Management Strategy for Mercury Highlights. (2010-10-19) http://www. ec. gc. ca/mercure-mercury/default. asp? Lang= En&n= 26BC75F2-1 3. John Moorhouse, M Harris. (2007, December 13). Chapter 2. Phase-Out Issues for Mercury Cell Technology in the Chlor-Alkali Industry. Retrieved from http://onlinelibrary. wiley. com/doi/10. 1002/9780470999479. 3. Ans: Studies have shown that dilapidated buildings can cause illness to people living or working in such places. Such neighborhoods can cause diseases mentioned as below: 1. Fire hazards: This has high chance due to lack of fire proofing 2. Illness including respiratory disorders, lung diseases and headaches 3. Problems like asthma. 4. Skin rashes and skin disorders 5. Water borne and air borne diseases depending on the amount of contamination, dampness, humidity and lack of cleanliness and appropriate ventilation. Due to the noticeable negative turn seen in health, some important questions to be asked to the employees suffering from illness will be as follows: 1. What was the general status of your health before shifting to this building? 2. Have you had any of the current illnesses before? 3. If yes, when and how often? 4. Have you identified any causes for the recurring illness you are suffering with? 5. Have there been any changes in your food intake and sleep to cause negative impact on your health? 6. How does it feel to work in this building? Hence, I request that we conduct this small but significant project for the welfare and progress of this company. REFERENCES: 1. Micheal Greenberg, Dr. Dona Schnider and Jennifer Martell. (1994) “ Hazardous Waste Sites, Stress and Neighborhood Quality in USA” The Environmentalist Vol 14, No. 2, 93-105. 2. John F brundage, MD, Robert McN. Scott, MD; Wayne M Ledner MD; David W. Smith, MS; Richard N. Miller, MD (1988, April 8). “ Building-Associated Risk of Febrile Acute Respiratory Diseases in Army Trainees”. Retrieved from http://jama. jamanetwork. com/article. aspx? volume= 259&issue= 14&page= 2108